Florida
Trauma Registry
Manual

DATA DICTIONARY

2016 Edition

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DOCUMENT CONTENTS

Dictionary Overview

Welcome to the Florida Department of Health's *Trauma Registry Manual Data Dictionary 2016 Edition*. This manual serves as the data submission requirements for the Florida Trauma Registry referred to as Florida Trauma Data Standard (FTDS).

Dictionary Design

The FTDS is designed as a supplement to the National Trauma Data Standard, (NTDS), published by the American College of Surgeons, National Trauma Data Bank and can be found at: http://www.ntdsdictionary.org/dataElements/datasetDictionary.html. All verified and provisional trauma centers shall submit data in accordance with the FTDS and NTDS. The parameters and edit checks described in the NTDS remain in effect unless noted differently within this manual.

Field Contents

In both the NTDS and the FTDS, a field can be "non-blank" in one of two ways – it can contain a Field Data Value (FDV), or it can have a Common Null Value (CNV). For example, a Field Data Value that might be contained in the field *O_03 Hospital Discharge Date* would be "2013-04-05". But if the patient was not discharged from the hospital (e.g. the patient died in the ED), the field will instead have a Common Null Value of "Not Applicable".
A field cannot contain a Field Data Value and have a Common Null Value at the same time. This is because the two Common Null Values – (1) *Not Applicable*, and (2) *Not Known/Not Recorded* – are meant to serve as a "reason" for the lack of a Field Data Value in the element.
A field is described as "valued" (or "completed") when it contains a Field Data Value. A field is described as "non-blank" when it either contains a Field Data Value or has one of the Common Null Values. A field is described as "blank" (or "empty") when it neither contains a Field Data Value or has a Common Null Value, or is just simply absent from the submission file.

Required Fields

A "required" field is a field that can potentially cause a record rejection if it is *blank* or does not contain an appropriate value– i.e. it does not contain a valid FDV or have a CNV as prescribed.
> *Note that in the NTDS, each page describing a field has an attribute entry listed as "Required in NTDS" – or sometimes "Required in XSD" – and this attribute is marked as "Yes" for every field in the dictionary. This requirement information is distinct from the required fields as described in this dictionary.*

The table below lists the fields in both NTDS and FTDS which are required to be "non-blank" in a trauma data submission. The first column in the table lists the field names. The second column denotes which type of data is required – either a Field Data Value (FDV), or a Common Null Values (CNV), as specified by each data element's requirements

Required Fields	*Required Value*
D_07 Date of Birth	FDV or CNV
D_08 Age (**IF** D_07 Date of Birth has CNV of NK or is "less than 24 hours"**)**	FDV or CNV
D_09 Age Units (**IF** D_07 Date of Birth has CNV of NK or is "less than 24 hours"**)**	FDV or CNV
D_10 Race	FDV or CNV
D_12 Sex	FDV or CNV
DF_01 Local Trauma Registry Number	FDV
DF_02 Event Specific Patient Tracking Number	FDV or CNV
DF_03 Social Security Number	FDV
DF_04 First Name	FDV or CNV
DF_06 Last Name	FDV or CNV
DF_07 Medical Record Number	FDV
I_01 Injury Incident Date	FDV or CNV

Required Fields	*Required Value*
I_02 Injury Incident Time	FDV or CNV
I_06 ICD-9 Primary E-Code **OR** I_07 ICD-10 Primary E-Code	FDV or CNV
I_08 ICD-9 Location E-Code **OR** I_09 ICD-10 Location E-Code	FDV or CNV
I_12 Incident Location Zip Code **OR (**I_13 Incident Country **AND** I_14 Incident State **AND** I_16 Incident City**)**	FDV or CNV
P_01 EMS Dispatch Date **(IF** P_07 Transport Mode does not = "4-POV, 5-Police or 6-Other"**)**	FDV or CNV
P_02 EMS Dispatch Time **(IF** P_07 Transport Mode does not = "4-POV, 5-Police or 6-Other"**)**	FDV or CNV
P_05 EMS Departure Date **(IF** P_07 Transport Mode does not = "4-POV, 5-Police or 6-Other"**)**	FDV or CNV
P_06 EMS Departure Time **(IF** P_07 Transport Mode does not = "4-POV, 5-Police or 6-Other"**)**	FDV or CNV
P_17 Inter-Facility Transfer	FDV
RF_01 Referring Hospital ID **(IF** P_17 Inter-Facility Transfer = "1 Yes"**)**	FDV or CNV
RF_02 Referring Hospital Arrival Date (IF P_17 Inter-Facility Transfer = "1 Yes")	FDV or CNV
RF_03 Referring Hospital Arrival Time **(IF** P_17 Inter-Facility Transfer = "1 Yes"**)**	FDV or CNV
RF_04 Referring Hospital Departure Date **(IF** P_17 Inter-Facility Transfer = "1 Yes"**)**	FDV or CNV
RF_05 Referring Hospital Departure Time **(IF** P_17 Inter-Facility Transfer = "1 Yes"**)**	FDV or CNV
ED_01 ED/Hospital Arrival Date	FDV
ED_03 Initial ED/Hospital Systolic Blood Pressure	FDV or CNV
ED_04 Initial ED/Hospital Pulse Rate	FDV or CNV
ED_06 Initial ED/Hospital Respiratory Rate	FDV or CNV
ED_07 Initial ED/Hospital Respiratory Assistance	FDV or CNV
ED_14 Initial GCS Assessment Qualifiers	FDV or CNV
ED_15 Initial ED/Hospital Height	FDV or CNV
ED_16 Initial ED/Hospital Weight	FDV or CNV
ED_19 ED Discharge Disposition	FDV or CNV
ED_20 Signs of Life	FDV
EDF_01 Trauma Alert Type	FDV
EDF_02 Trauma Team Activation Level	FDV
EDF_03 Trauma Team Activation Date **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_04 Trauma Team Activation Time **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_05 Trauma Specialist Type **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_06 Trauma Specialist Called Date **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_07 Trauma Specialist Called Time **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_08 Trauma Specialist Arrival Date **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
EDF_09 Trauma Specialist Arrival Time **(IF** EDF_02 Trauma Team Activation Level = "1", "2", or "3"**)**	FDV or CNV
DG_01 Co-Morbid Conditions	FDV or CNV
DG_02 ICD-9 Injury Diagnoses **OR** DG_03 ICD-10 Injury Diagnoses	FDV
O_01 Total ICU Length of Stay	FDV or CNV
O_03 Hospital Discharge Date	FDV or CNV
O_05 Hospital Discharge Disposition	FDV or CNV

Required Fields	Required Value
Q_01 Hospital Complications	FDV or CNV

TQIP Fields

Provisional and verified trauma centers must submit all the Trauma Quality Improvement Program (TQIP) fields listed in the NTDS to the Department and all verified trauma centers must maintain participation in the American College of Surgeons Trauma Quality Improvement Program as per Rule 64J-2.006. (See the NTDS for more TQIP information).

	Required Fields	*Required Value*
PM_01	Highest GCS Total	FDV or CNV
PM_02	GCS Motor Component of Highest GCS Total	FDV or CNV
PM_03	GCS Assessment Qualifier Component of Highest GCS Total	FDV or CNV
PM_04	Initial ED/Hospital Pupillary Response	FDV or CNV
PM_05	Midline Shift	FDV or CNV
PM_06	Cerebral Monitor	FDV or CNV
PM_07	Cerebral Monitor Date	FDV or CNV
PM_08	Cerebral Monitor Time	FDV or CNV
PM_09	Venous Thromboembolism Prophylaxis Type	FDV or NK
PM_10	Venous Thromboembolism Prophylaxis Date	FDV or CNV
PM_11	Venous Thromboembolism Prophylaxis Time	FDV or CNV
PM_12	Transfusion Blood (4 Hours)	FDV
PM_13	Transfusion Blood (24 Hours)	FDV or CNV
PM_14	Transfusion Blood Measurement	FDV or CNV
PM_15	Transfusion Blood Conversion	FDV or CNV
PM_16	Transfusion Plasma (4 Hours)	FDV or CNV
PM_17	Transfusion Plasma (24 Hours)	FDV or CNV
PM_18	Transfusion Plasma Measurement	FDV or CNV
PM_19	Transfusion Plasma Conversion	FDV or CNV
PM_20	Transfusion Platelets (4 Hours)	FDV or CNV
PM_21	Transfusion Platelets (24 Hours)	FDV or CNV
PM_22	Transfusion Platelets Measurement	FDV or CNV
PM_23	Transfusion Platelets Conversion	FDV or CNV
PM_24	Cryoprecipitate (4 Hours)	FDV or CNV
PM_25	Cryoprecipitate (24 Hours)	FDV or NK

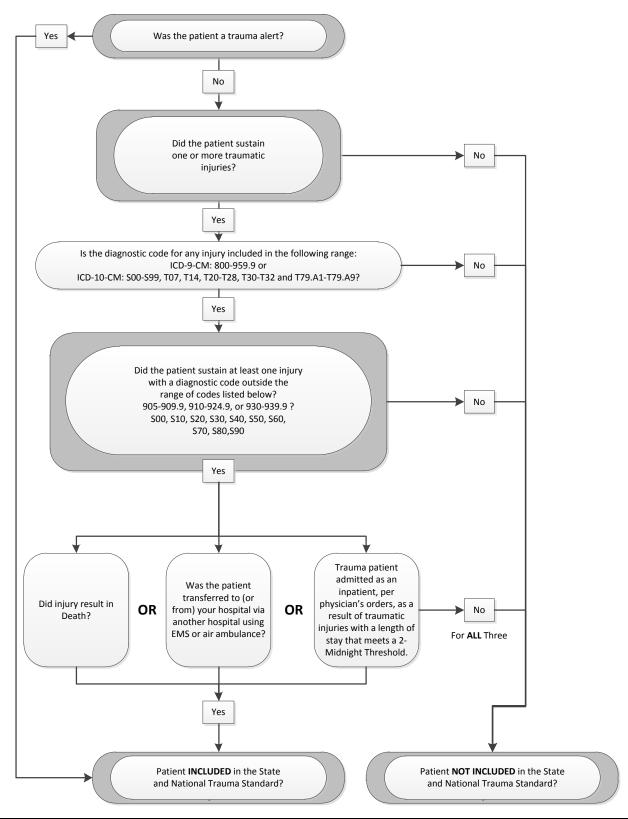| Required Fields		Required Value
PM_26	Cryoprecipitate Measurement	FDV or CNV
PM_27	Cryoprecipitate Conversion	FDV or CNV
PM_28	Lowest ED SBP	FDV or CNV
PM_29	Angiography	FDV or CNV
PM_30	Embolization Site	FDV or CNV
PM_31	Angiography Date	FDV or NK
PM_32	Angiography Time	FDV or NK
PM_33	Surgery For Hemorrhage Control Type	FDV or CNV
PM_34	Surgery For Hemorrhage Control Date	FDV or CNV
PM_35	Surgery For Hemorrhage Control Time	FDV or CNV
PM_36	Withdrawal Of Care	FDV or CNV
PM_37	Withdrawal Of Care Date	FDV or CNV
PM_38	Withdrawal Of Care Time	FDV or CNV

Reporting Requirements

Reporting Overview

Florida verified and provisional trauma centers are required to submit data to the Department. Trauma Centers must submit data on a quarterly basis. However, data may be submitted more frequently (i.e. daily, weekly, or monthly). The submission must be through the web at **www.fltraumaregistry.com**. The data file(s) submitted shall contain (in total) the data for all trauma cases meeting inclusion criteria which were discharged during that quarter. All submitted data files received by the Department are imported and stored within the NGTR.

Inclusion Criteria

The FTDS uses inclusion criteria that are similar to that of the NTDS. The FTDS incorporates the criteria of trauma alert as an automatic inclusion into the FTDS and defines trauma admission that are to be included. (Trauma Admission is defined in the definition section.). For records that indicate a trauma alert, the Department will disregard NTDS edit checks 6903 (8703 for ICD-10). All of NTDS rules are enforced when the Department sends the data to the National Trauma Data Bank (NTDB).

Florida Trauma Registry/Florida Trauma Data Standard Inclusion Criteria

Yes ← **Was the patient a trauma alert?**

No ↓

Did the patient sustain one or more traumatic injuries? → No

Yes ↓

**Is the diagnostic code for any injury included in the following range:
ICD-9-CM: 800-959.9 or
ICD-10-CM: S00-S99, T07, T14, T20-T28, T30-T32 and T79.A1-T79.A9?** → No

Yes ↓

**Did the patient sustain at least one injury with a diagnostic code outside the range of codes listed below?
905-909.9, 910-924.9, or 930-939.9 ?
S00, S10, S20, S30, S40, S50, S60, S70, S80,S90** → No

Yes ↓

Did injury result in Death?   **OR**   **Was the patient transferred to (or from) your hospital via another hospital using EMS or air ambulance?**   **OR**   **Trauma patient admitted as an inpatient, per physician's orders, as a result of traumatic injuries with a length of stay that meets a 2-Midnight Threshold.** → No

For **ALL** Three

Yes ↓

Patient INCLUDED in the State and National Trauma Standard?

Patient NOT INCLUDED in the State and National Trauma Standard?

Submission Details

A. All data shall be submitted electronically to the Department at the www.fltraumaregistry.com web site.

B. Accounts to submit data are set up for each Florida verified or provisional trauma center by the Florida Department of Health as part of the trauma center application and approval process.

C. Data verification: Data reported to the NGTR must be verified (checked for completeness and accuracy) by the reporting trauma center before submitting to the Department.

D. Data may be submitted on a daily, weekly, monthly, or quarterly basis. Records of patients, sorted by the date of a death or discharge from the hospital/trauma center must be validated and submitted to the Department by the final due dates as listed below:

Reporting Quarter	Reporting Dates	Final Submission Due Dates
Quarter 1	January 1- March 31 Discharges	Due July 1
Quarter 2	April 1 - June 30 Discharges	Due October 1
Quarter 3	July 1 - September 30 Discharges	Due January 1
Quarter 4	October 1- December 31 Discharges	Due April 1

E. Data submitted to the Department must be a valid record in order to be used in the determination of a hospital's trauma caseload volume. The data dictionary section of this manual and that of the NTDB details the field requirements of each data element and what values are accepted.

F. Suggested naming convention: Hospital ID_*Reporting-Period*(Q1, Q2, Jan) _date (MM/DD/YY) (add _resubmission for files being resubmitted). The NGTR will only allow 50 characters in the file name including spaces, special characters and the .XML extension.

G. The Department will only accept data in an XML file format based upon the NGTR XML Schema Definition derived from this data dictionary. **Records may not be submitted in another format or medium.**

H. File Acceptance: Must be the appropriate XML schema and in the acceptable format. Files that cannot be recognized as a valid format will not be processed and will not receive a submission report. In this case, the submitting hospital will receive notification from Department staff that a problem occurred in processing the submission. The problem will need to be corrected and the file resubmitted no later than the final due date for that quarter.

I. Record Acceptance: Records that contain Level 1 or Level 2 errors will cause that record to be rejected. The Trauma Center will be required to correct these errors and resubmit to the NGTR for that record to be loaded into the database. An individual record may not have any Level 3 errors and no more than 14 Level 4 errors. A report with details on records containing any errors will be returned to the hospital. Errors in a record will need to be corrected and resubmitted by the final submission due date to be considered as valid. Records that are in excess of either of the Level 3 or 4 error thresholds or submitted past the final submission due date may not be included in the trauma caseload volume and may not be used for the purposes of reporting.

J. The Department may audit (by site visit, desk audit or through an agent) a trauma center's medical records at any time.

K. The Department may submit the NTDS and Trauma Quality Improvement Program (TQIP) fields to the American College of Surgeons (ACS) for all trauma centers. The Department may submit data to ACS in accordance with the Florida quarterly submission schedule and will include the appropriate records for the NTDB's "call for data period" that has been submitted and validated to the NGTR. Please note that submission dates of ACS and Florida may be represented differently in reporting.

L. It is the responsibility of the reporting trauma center to correct any reporting errors and resubmit the data. The deadline for all trauma center resubmissions for consideration in the trauma caseload volume is the final quarterly submission due date. Any data submitted after the final submission due date will be kept for reporting purposes but may not contribute to the trauma caseload volume.

M. When files are resubmitted, the NGTR will verify if a record already exists. If the record has previously been submitted, the newly submitted file will overwrite the previous submission. It is recommended that only flagged records be resubmitted to prevent overwriting a valid record with incorrect data.

Extension Requests

Extensions to the final submission due dates in the FTDS may be granted by the Department for a maximum of 30 days from the final submission due date. A written request signed by the hospital's chief executive officer (or designee) and trauma medical director must be received by the Department 30 days prior to the final submission due date (scanned image sent via email acceptable). These requests may be mailed to: Bureau of Emergency Medical Oversight, 4052 Bald Cypress Way Bin A-22 Tallahassee, FL 32399 or by email to Trauma.Registry@flhealth.gov.

Extension requests are only granted for unforeseen factors beyond the control of the reporting facility. These factors must be specified in the written request for the extension along with documentation of efforts undertaken to meet the submission requirements. Staff vacations, maternity leave, a failure to appropriately plan out a timeframe of a software upgrade are not considered "unforeseen" requests. Extensions must be approved by the Department and will not be granted verbally.

Please note an extension may cause Department to miss the National data submission deadline to ACS (for the individual hospital) and therefore will affect ACS's reporting for that hospital.

Registry Conventions

Error Levels

Any errors generated as a result of a failure to meet the condition defined within a business rule will reference the rule id, the data element, the level of the error, and the business rule description.

> *Error: <Business Rule Reference> <Data Element> <Level> <Description>*

Where Level is defined as:

- **Level 1: Reject –Format/schema** – any element that does not conform to the rules of the XSD. That is, these are errors that arise from XML data that cannot be parsed or would otherwise not be legal XML file. Some errors in this Level do not have a Rule ID – for example: illegal tag, commingling of null values and actual data, out of range errors, etc.
- **Level 2: Reject – Inclusion criteria and/or critical to analyses** – this level affects the fields needed to determine if the record meets the inclusion criteria for FTDS or are required for critical analyses.
- **Additional levels are defined for each data element in the Business Rules table**
  - **Level 3: Flag – Major Data Error**
  - **Level 4: Flag – Minor Data Error**

Null Values

For any collection of data to be of value and reliably represent what was intended, a strong commitment must be made to ensure the correct documentation of incomplete data. In situations where a field data value is not known or appropriate for the data element, common null values must be used in accordance with the FTDS and NTDS.

- **[1]** *Not Applicable*: This null value code applies if, at the time of patient care documentation, the information requested was "Not Applicable" to the patient, the hospitalization or the patient care event. For example, variables documenting EMS care would be "Not Applicable" if a patient self-transports to the hospital.

- **[2]** *Not Known/Not Recorded:* This null value applies if, at the time of patient care documentation, information was "Not Known" (to the patient, family, health care provider) or no value for the element was recorded for the patient. This documents that there was an attempt to obtain information but it was unknown by all parties or the information was missing at the time of documentation. For example, injury date and time may be documented in the hospital patient care report as "Unknown". Another example, Not Known/Not Recorded should also be coded when documentation was expected, but none was provided (i.e., no EMS run sheet in the hospital record for patient transported by EMS).

Definitions

ACS NTDB National Trauma Data Standard: Data Dictionary 2016 Admissions ("NTDS") – A manual that is developed by the American College of Surgeons (ACS) in order to create a standardized national trauma database. This manual is incorporated into Florida Administrative Rule by reference.

American College of Surgeons ("ACS") - Nationally recognized scientific association of surgeons that improve the quality of care for the surgical patient by setting high standards for surgical education and practice.

Business Rule – A condition used to identify a data error. The business rule will have an associated Rule ID. The term "edit checks" is used by the NTDS and can be used interchangeably.

Data Element – Single category of information reported in a given trauma record that contains field values or other related points of data.

Department – The Department of Health

Field Value – The data entered into a data element

Florida Trauma Registry Manual, Data Dictionary 2016 Edition ("FTDS") – A manual that is developed by the Department to act as a supplement to the NTDS. This manual identifies the requirements of the FTDS and state specific administrative components not covered by the NTDS. This manual is incorporated into Florida Administrative Rule by reference.

Next Generation Trauma Registry ("NGTR") – The electronic data collection and reporting system used by the Department to obtain records from provisional/verified trauma centers and acute care hospitals.

Transfer – Trauma patient that was transported to/from another hospital/trauma center by EMS, Air Ambulance, or other transport designed for trauma patients.

Trauma Admission ("Admission") - Trauma patient admitted as an inpatient, per physician's orders, as a result of traumatic injuries and the patient's ED/Hospital Arrival Time and Hospital Discharged Time meets a 2-Midnight Threshold.

Trauma Caseload Volume – As defined in 395.4001(13) Florida Statues, "Trauma caseload volume" means the number of trauma patients reported by individual trauma centers to the Trauma Registry and validated by the Department.

Trauma Patient – A patient that meets the inclusion criteria of the FTDS.

Trauma Patient Discharge ("Discharge") – The date/time the patient stopped receiving trauma services. This would include the date/time of the official written order from the physician for the patient to be discharged from the hospital, transferred to hospice (in or out of the hospital), transferred to rehabilitation (in or out of hospital), or the date/time the patient is transferred to a service that requires a new hospital account.

Trauma Record – A collection of data elements that provide an account of each episode where a trauma patient received trauma services.

Trauma Record File ("File") – A trauma record or a combination of trauma records that represent the treatment that was provided to a patient(s) meeting Florida inclusion criteria and submitted to the Department.

Trauma Service - Trauma service represents the primary structure for providing care for trauma patients. The service includes personnel and other resources necessary to ensure the appropriate and efficient provision of care.

Valid Record ("Valid") – A trauma record that meets Department standards for timeliness, completeness, and has not exceeded the error threshold for a given record.

XML Schema Definition ("XSD") – A document that specifies how to formally describe the elements in an Extensible Markup Language (XML). The XSD is used by NGTR to verify the data in a file. The current XSD is the FLTDS_2016.XSD Version 1.0 and is incorporated into rule by reference.

Additional Florida Validation Rules

Rule ID	Level	Rule Description
60000	3	Record does not meet Florida Trauma Inclusion Criteria

Demographic Information

DF_01 Local Trauma Registry Number

Field Definition	Unique identifier generated for a patient within the Trauma Center software application at your facility. It should be sequentially generated for each trauma patient for each trauma incident, and it should be unique from your facility's Medical Record Number.
Data Format	*[number]*
XSD Type	*xs:integer*
XSD Element	*LocalRegNumber*
Multiple Entry	No – A trauma patient may have only one reported unique Local Trauma Registry Number for an incident.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	Up to 30 digits
Field Values	Relevant value for data element
Field Constraints	The field must contain a minimum of one character
Additional Info	The local trauma registry number may not be unique statewide, but it should be unique for a given combination of a particular patient at a particular facility for a particular incident.
Related Fields	

Rule ID	Level	Rule Description
50101	1	Invalid value (element must conform to data specification)
50102	2	Field cannot be blank
50103	2	Field cannot be Not Applicable
50104	2	Field cannot be Not Known/Not Recorded

DF_02 Event Specific Patient Tracking Number (ESPTN)

Field Definition	Unique identifier for this patient for this event, generated by the first Florida state-licensed agency which renders service to the patient for the event
Data Format	*[text]*
XSD Data Type	*xs:String*
XSD Element	*ESPTN*
Multiple Entry	No – A trauma record may have only one ESPTN
Accepts Nulls	Partial – A Common Null Value (CNV) of "Not Known/Not Recorded" is valid
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	44 characters in the form: XXX_MMDDYYYY_LicNum_PatNum
Field Values	The ESPTN is comprised of the following information: XXX A three character code indicating the type of agency: the code is either "EMS" for EMS agency, "HOS" for hospital agency, or "LAW" for law enforcement agency MM The two-digit month DD The two-digit day of the month YYYY The four-digit year LicNum The Florida state-issued license number of the agency PatNum The agency-assigned patient number
Field Constraints	This field should consist of the three-character agency type (1-3), the first underscore (4), the eight-digit date (5-12), the second underscore (13), a minimum/maximum ten characters for the Florida state-issued license number (padded with leading zeroes, if necessary) (14-23), the third underscore (24), and a minimum/maximum of 20 characters agency-assigned patient number (padded with leading zeroes, if necessary) (25-44).
Additional Info	▪ The state-issued license number should be unique <u>within</u> an agency type, but may not be unique <u>across</u> agency types ▪ The agency-assigned patient number should be unique for that patient within the context of that agency, but may not be unique across multiple events for the same patient within the agency ▪ Use the date the trauma patient arrived at your facility. This could be the ED or Hospital Arrival Date ▪ If the patient arrives at your facility without an ESPTN number, it is the reporting facility's responsibility to create one. This field is intended to be auto-generated by user action when a prior ESPTN is not documented by EMS or law enforcement agency
References	

Rule ID	Level	Rule Description
50201	1	Invalid value (element must conform to data specification)
50202	2	Field cannot be blank
50203	4	Field cannot be Not Applicable, this field must be valued or Not Known/Not Recorded
50204	4	The "MMDDYYYY" date in the ESPTN should not be earlier than the *NTDS I_01 Injury Incident Date* value

DF_03 Social Security Number

Field Definition	The U.S Government issued Social Security Number for the patient
Data Format	*[text]*
XSD Data Type	*xs:string*
XSD Element	*PatientSsn*
Multiple Entry	No – A trauma patient may have only one reported Social Security Number.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	Eleven characters formatted as "nnn-nn-nnnn" where "n" is a number between 0 and 9. (Note that this element is encrypted by the State.)

Field Values	Relevant value for data element. If the SSN is unknown, use the following that pertain:
	
	    000-00-0000 = Infants who are 1 year old or less.
	    555-55-5555 = Non-Citizens
	    777-77-7777 = Not Available

Field Constraints	
Additional Info	
References	

Rule ID	Level	Rule Description
50301	1	Invalid value (element must conform to data specification)
50302	2	Field cannot be blank
50303	2	Field cannot be Not Applicable
50304	2	Field cannot be Not Known/Not Recorded
50305	4	If the *NTDS Age* is greater than one year, then the *Social Security Number* should not be all zeros
50306	4	If the *NTDS Patient's Home Country* is the United States, then the *Social Security Number* should not be all fives

DF_04 First Name

Field Definition	The patient's first name, given as stated on birth certificate or change-of-name affidavit.
Data Format	*[text]*
XSD Data Type	*xs:string*
XSD Element	*FirstName*
Multiple Entry	No – A trauma patient may have only one reported First Name.
Accepts Nulls	Partial – A Common Null Value (CNV) of "Not Known/Not Recorded" is valid
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	Up to 30 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the First Name is unknown, and a Common Null Value of "Not Known/Not Recorded" is not utilized, then the trauma center's internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50401	1	Invalid value (element must conform to data specification)
50402	3	Field cannot be Not Applicable
50403	2	Field cannot be blank

DF_05 Middle Name

Field Definition	The patient's middle name or middle initial, given as stated on birth certificate or change-of-name affidavit.
Data Format	*[text]*
XSD Data Type	*xs:string*
XSD Element	*MiddleName*
Multiple Entry	No – A trauma patient may have only one reported Middle Name.
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	No – This element is not required in the Florida Trauma Data Standard (FTDS)
Field Format	Up to 30 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the Middle Name is unknown, and a Common Null Value is not utilized, then the trauma center's internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50501	1	Invalid value (element must conform to data specification)
50502	2	Field cannot be blank

DF_06 Last Name

Field Definition	The patient's last name, given as stated on birth certificate or change-of-name affidavit.
Data Format	*[text]*
XSD Data Type	*xs:string*
XSD Element	*LastName*
Multiple Entry	No – A trauma patient may have only one reported Last Name.
Accepts Nulls	Partial – A Common Null Value (CNV) of "Not Known/Not Recorded" is valid
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	Up to 50 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element.
Field Constraints	If the element contains a field value, that value must contain at least one alphabetic character
Additional Info	If the Last Name is unknown, and a Common Null Value of "Not Known/Not Recorded" is not utilized, then the trauma center's internal naming policies and standard should be followed.
References	

Rule ID	Level	Rule Description
50601	1	Invalid value (element must conform to data specification)
50602	3	Field cannot be Not Applicable
50603	2	Field cannot be blank

DF_07　Medical Record Number

Field Definition	The medical record number or other patient identifier on the transcript of the medical information about the patient.
Data Format	*[text]*
XSD Data Type	*xs:AlphaDash*
XSD Element	*MedicalRecNum*
Multiple Entry	No – A trauma patient may have only one reported Medical Record Number.
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	Up to 20 characters. (Note that this element is encrypted by the State.)
Field Values	Relevant value for data element. If this number is unknown, a temporary number may be assigned.
Field Constraints	
Additional Info	The medical record number is unique to a given patient, but not unique to a particular incident. The other patient identifier will be your internal defined unique tracking number.
References	

Rule ID	Level	Rule Description
50701	1	Invalid value (element must conform to data specification)
50702	2	Field cannot be blank
50703	2	Field cannot be Not Applicable
50704	2	Field cannot be Not Known/Not Recorded

Referring Hospital Information

RF_01 Referring Hospital ID

Field Definition	The hospital from which the patient was referred, as selected from a list of hospitals in the state of Florida and additional hospitals. The Referring Hospital is the facility where the patient was given care before reaching your hospital. Admission to the Referring Hospital is not necessary.
Data Format	*[combo] single-choice*
XSD Data Type	*xs:string*
XSD Element	*ReferringHospitalId*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when *NTDS Inter-Facility Transfer-* P_17 is "1" (Yes)
Field Format	Twenty characters
Field Values	For hospitals in Florida the AHCA file number is used. For hospitals outside of FL use 999999 and for a VA hospital use 555555
Field Constraints	A biu of "1" for N/A is only reported if NTDS Interfacility Transfer is "2" (No); if *NTDS Inter-Facility Transfer* is "1" (Yes) than the field must be valued or a biu of "2" for not known/not recorded can be used
Additional Info	

Rule ID	Level	Rule Description
50801	1	Invalid value (element must conform to data specification)
50802	3	If *NTDS Inter-Facility Transfer* indicates a transfer took place, *Referring Hospital Facility ID* must contain a valid ID value or a biu of 2- Not known/not recorded
50803	2	Field cannot be blank
50804	3	If *NTDS Inter-Facility Transfer* indicates a transfer did not take place, then *Referring Hospital Facility ID* must be blank or Not Applicable

RF_02 Referring Hospital Arrival Date

Field Definition	The date of the patient's arrival at the referring hospital (the hospital where the patient was given care before reaching your hospital). Admission to the referring hospital is not necessary
Data Format	*[date]*
XSD Data Type	*xs:date*
XSD Element	*ReferringHospitalArrivalDate*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when *NTDS Inter-Facility Transfer* is "1" (Yes)
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
50901	1	Invalid value (element must conform to data specification)
50902	3	If *NTDS Inter-Facility Transfer* indicates a transfer took place, then *Referring Hospital Arrival Date* must contain a date value or a biu of 2- Not known/not recorded
50903	4	The date / time recorded in the *Referring Hospital Arrival Date* / *Time* fields must be later than or equal to the *NTDS Injury Incident Date* / *Time* fields
50904	3	If *NTDS Inter-Facility Transfer* indicates a transfer did not take place, then *Referring Hospital Arrival Date* must be blank or Not Applicable

RF_03 Referring Hospital Arrival Time

Field Definition	The time the patient arrived at the referring hospital
Data Format	*[time]*
XSD Data Type	*xs:time*
XSD Element	*ReferringHospitalArrivalTime*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when *NTDS Inter-Facility Transfer* is "1" (Yes)
Field Format	Five characters formatted as HH:MM, HHMM or HH:MM:SS (add to all time fields)
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

Rule ID	Level	Rule Description
51001	1	Invalid value (element must conform to data specification)
51002	3	If *NTDS Inter-Facility Transfer* indicates a transfer took place, then *Referring Hospital Arrival Time* must contain a time value or a biu of 2 for not known/not recorded
51003	4	If *Referring Hospital Arrival Time* contains a time value, then *Referring Hospital Arrival Date* must contain a date value or a biu of 2 for not known/not recorded
51004	3	If *NTDS Inter-Facility Transfer* indicates a transfer did not take place, then *Referring Hospital Arrival Time* must be blank or Not Applicable

RF_04 Referring Hospital Discharge Date

Field Definition	The date of the patient's discharge from the referring hospital.
Data Format	*[date]*
XSD Data Type	*xs:date*
XSD Element	*ReferringHospitalDischargeDate*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when *NTDS Inter-Facility Transfer* is "1" (Yes)- This is confusing see RF-01 for suggested rewording
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
51101	1	Invalid value (element must conform to data specification)
51102	3	If *NTDS Inter-Facility Transfer* indicates a transfer took place, then *Referring Hospital Discharge Date* must contain a date value or a biu of 2 for not known/not recorded
51103	4	The date / time recorded in the *Referring Hospital Discharge Date* / *Time* fields must be later than or equal to the *NTDS Injury Incident Date* / *Time* fields
51104	4	The date / time recorded in the *Referring Hospital Discharge Date* / *Time* fields must be later than or equal to the *Referring Hospital Arrival Date* / *Time* fields
51105	3	If *NTDS Inter-Facility Transfer* indicates a transfer did not take place, then *Referring Hospital Discharge Date* must be blank or Not Applicable

RF_05 Referring Hospital Discharge Time

Field Definition	The time of the patient's discharge from the referring hospital.
Data Format	*[time]*
XSD Data Type	*xs:time*
XSD Element	*ReferringHospitalDischargeTime*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be non-blank (i.e. must be valued or have a CNV) when *NTDS Inter-Facility Transfer* is "1" (Yes)
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

Rule ID	Level	Rule Description
51201	1	Invalid value (element must conform to data specification)
51202	3	If *NTDS Inter-Facility Transfer* indicates a transfer took place, then *Referring Hospital Discharge Time* must contain a time value or a biu of 2 for not known/not recorded
51203	4	If *Referring Hospital Discharge Time* contains a time value, then *Referring Hospital Discharge Date* must contain a date value
51204	3	If *NTDS Inter-Facility Transfer* indicates a transfer did not take place, then *Referring Hospital Discharge Time* must be blank or Not Applicable

Emergency Department Information

EDF_01 Trauma Alert Type

Field Definition	Type of trauma alert called in accordance with the state trauma scorecard criteria.
Data Format	*[combo] single-choice*
XSD Data Type	*xs:nonNegativeInteger*
XSD Element	*TraumaAlertType*
Multiple Entry	No
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 5-8
Additional Info	If trauma alert type is Trauma Center Criteria than at least one Field Data Value is required in the NTDS field(s) Trauma Center Criterion or Vehicular, Risk, Pedestrian fields.
References	

Field Values	
1 ~~Red (single criterion)~~ Retired 2015	2 ~~Blue (two criteria~~) Retired 2015
3 ~~GCS ≤ 12~~ Retired 2015	4 ~~Judgment EMT~~ Retired 2015
5 Judgment Hospital	6 Local (local criteria)
7 NTA (Not a Trauma Alert)	8 Trauma Center Criteria

Rule ID	Level	Rule Description
51301	1	Invalid value (element must conform to data specification)
51302	2	Field cannot be blank
51303	2	Field cannot be Not Applicable
51304	2	Field cannot be Not Known/Not Recorded
51307	2	If Trauma Alert is valued as 8, then either Trauma Center Criterion or Vehicular, Risk, Pedestrian must be valued.
51308	2	If Trauma Alert is valued as 7, then both Trauma Center Criterion or Vehicular, Risk, Pedestrian must be valued as Not Applicable

EDF_02 Trauma Team Activation Level

Field Definition	Trauma Team Activation - Announcement of incoming trauma patient via pager system to assemble all members of the trauma team in the ED resuscitation area.
Data Format	*[combo] multiple-choice*
XSD Data Type	*xs:nonNegativeInteger*
XSD Element	*TeamActivationLevel*
Multiple Entry	No
Accepts Nulls	No – Common Null Values (CNVs) are not accepted
Required Field	Yes – This element is required in the Florida Trauma Data Standard (FTDS)
Field Format	One numeric digit
Field Values	See below
Field Constraints	From 1 to 4
Additional Info	
References	

Field Values	
1 Level 1 - Highest level of team activation at your institution using defined trauma triage guidelines.	2 Level 2 - Secondary level of team activation, if applicable, at your institution, using defined trauma triage guidelines.
3 Level 3 - The last type of notification / communication to the Trauma Team as defined in the user's Tertiary Activation system plan.	4 Trauma team not activated

Rule ID	*Level*	*Rule Description*
51401	1	Invalid value (element must conform to data specification)
51402	2	Field cannot be blank
51403	2	Field cannot be Not Applicable
51404	2	Field cannot be Not Known/Not Recorded
51405	2	If *Trauma Team Activation Level* is "4" (Not Activated) then *Trauma Alert Type* must be "7" (NTA)

EDF_03 Trauma Team Activation Date

Field Definition	The date that the trauma team corresponding to level 1, 2, or 3 was called (activated).
Data Format	*[date]*
XSD Data Type	*xs:date*
XSD Element	*TeamActivationDate*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
51501	1	Invalid value (element must conform to data specification)
51502	3	Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
51505	2	Field cannot be blank

EDF_04 Trauma Team Activation Time

Field Definition	The time that the trauma team corresponding to level 1, 2, or 3 was called (activated).
Data Format	*[time]*
XSD Data Type	*xs:time*
XSD Element	*TeamActivationTime*
Multiple Entry	No
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	
References	

Rule ID	*Level*	*Rule Description*
51601	1	Invalid value (element must conform to data specification)
51602	3	Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
51603	4	If *Trauma Team Activation Time* is completed, then *Trauma Team Activation Date* must also be completed
51604	2	Field cannot be blank

EDF_05 Trauma Specialist Type

Field Definition	The type of specialist requested for the trauma alert.
Data Format	*[combo] multiple-choice*
XSD Data Type	*xs:nonNegativeInteger*
XSD Element	*SpecialistType*
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	One numeric digit
Field Values	See below, If specialist is not listed the specialist field should have a biu of 1
Field Constraints	From 1 to 7
Additional Info	A max of 20 Trauma Specialist 'records' may be specified. If there is a Trauma Alert, then a minimum of one Trauma Specialist 'record' must be specified with a type of ('1' Trauma Surgeon, '2' Neurosurgeon, or '3' Orthopedic Surgeon) and it should consist of the following data elements for each record: Trauma Specialist Type Trauma Specialist Called Date Trauma Specialist Called Time Trauma Specialist Arrival Date Trauma Specialist Arrival Time
References	

Field Values	
1 Trauma Surgeon	2 Neurosurgeon
3 Orthopedic Surgeon	4 ED Physician
5 Anesthesiologist	6 Medical Doctor
7 Chief Resident	8 Other

Rule ID	Level	Rule Description
51701	1	Invalid value (element must conform to data specification)
51702	2	Blank or Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
51703	3	If *Trauma Alert Type* is not '7" NTA (not an alert) then a minimum of one Trauma Specialist 'record' must be specified with a value of either '1' Trauma Surgeon, '2' Neurosurgeon, or '3' Orthopedic Surgeon for *Trauma Specialist Type or '4'- ED Physician*
51704	4	If *Trauma Team Activation Level* is ('1' Level 1 or '2' Level 2, or '3' Level 3) then a minimum of one Trauma Specialist 'record' must be completed with a valid value for *Trauma Specialist Type*
51705	2	Field cannot be blank

EDF_06 Trauma Specialist Called Date

Field Definition	The date at which assistance was requested. Corresponds to the value of the Trauma Specialist Type.
Data Format	*[date]*
XSD Data Type	*xs:date*
XSD Element	*SpecialistCalledDate*
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
51801	1	Invalid value (element must conform to data specification)
51802	3	Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
51804	3	*Trauma Specialist Called Date / Time* must be earlier than or equal to the *Trauma Specialist Arrival Date / Time*, respectively
51805	2	Field cannot be blank

EDF_07 Trauma Specialist Called Time

Field Definition	The time at which assistance was requested. Corresponds to the value of the Trauma Specialist Type.
Data Format	*[time]*
XSD Data Type	*xs:time*
XSD Element	*SpecialistCalledTime*
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	When staff is already on site at the time the trauma alert is called the called and arrival times should be the same.-
References	

Rule ID	Level	Rule Description
51901	1	Invalid value (element must conform to data specification)
51902	3	Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
51903	4	If *Trauma Specialist Called Time* is completed, then *Trauma Specialist Called Date* must also be completed
51904	2	Field cannot be blank

EDF_08 Trauma Specialist Arrival Date

Field Definition	The earliest date of arrival of the specialist at the patient's bedside, whether in the ED, OR, or ICU. Corresponds to the value of the Trauma Specialist Type.
Data Format	*[date]*
XSD Data Type	*xs:date*
XSD Element	*SpecialistArrivalDate*
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Ten characters formatted as YYYY-MM-DD.
Field Values	Valid calendar date
Field Constraints	From 1990-01-01 to 2030-12-31
Additional Info	
References	

Rule ID	Level	Rule Description
52001	1	Invalid value (element must conform to data specification)
52002	3	Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
52003	2	Field cannot be blank

EDF_09 Trauma Specialist Arrival Time

Field Definition	The earliest time of arrival of the specialist at the patient's bedside, whether in the ED, OR, or ICU. Corresponds to the value of the Trauma Specialist Type
Data Format	*[time]*
XSD Data Type	*xs:time*
XSD Element	*SpecialistArrivalTime*
Multiple Entry	Yes – Maximum of 20
Accepts Nulls	Yes – Common Null Values (CNVs) are accepted
Required Field	Conditional – This element must be valued or have a CNV of "Not Known" when *Trauma Team Activation Level* is "1", "2", or "3"
Field Format	Five characters formatted as HH:MM
Field Values	Valid 24-hour time
Field Constraints	From 00:00 to 23:59
Additional Info	See Trauma Specialist Type and Trauma Specialist Arrival for business rules involving Trauma Specialist Arrival Time
References	

Rule ID	Level	Rule Description
52101	1	Invalid value (element must conform to data specification)
52102	3	Blank or Not Applicable, field must be valued or "Not Known" if *Trauma Team Activation Level* is "1", "2", or "3"
52103	4	If *Trauma Specialist Arrival Time* is completed, then *Trauma Specialist Arrival Date* must also be completed
52104	2	Field cannot be blank

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Change Log

Change Date	Discharge Year	Change Location	Field Name	Content Change
Aug-15	2016	Dictionary Edition		Updated to reflect 2016
Aug-15	2016	Dictionary Overview		Updated dictionary overview section to reflect current acronyms
Aug-15	2016	Dictionary Design		Updated dictionary design section to reflect current acronyms and identified supplemental material(s) and web address
Aug-15	2016	Dictionary Content		Deleted
Aug-15	2016	Field Contents		Updated acronyms
Aug-15	2016	Required Fields		Updated acronyms, requirements, removed excessive verbiage and added new TQIP fields
Aug-15	2016	Reporting Overview		Provided clarification of this section and removed extraneous information
Aug-15	2016	Inclusion Criteria		Updated to provide specific guidance on how to determine inclusion in the registry. Clarified definition of an admission and provided a flow chart
Aug-15	2016	Submission Details		Refined section to provide clarification
Aug-15	2016	Definitions		Added a definitions page
Aug-15	2016	Data Fields		Updated business rules to match current NTDB standards on various fields
Aug-15	2016	Demographics	ESPTN	Updated with clarifying information
Aug-15	2016	Demographics	First Name	Added business rule to prevent blanks
Aug-15	2016	Demographics	Middle Name	Added business rule to prevent blanks

Aug-15	2016	Demographics	Last Name	Added business rule to prevent blanks
Aug-15	2016	Referring Hospital Information	Referring hospital ID	Clarified the Field Constraints of this field. Added business rules to prevent blanks/ erroneous data
Aug-15	2016	Referring Hospital Information	Referring hospital Arrival date	Added additional business rule
Aug-15	2016	Referring Hospital Information	Referring Hospital Arrival Time	Added additional business rule
Aug-15	2016	Referring Hospital Information	Referring Hospital Discharge Date	Added additional business rule
Aug-15	2016	Referring Hospital Information	Referring Hospital Discharge Time	Added additional business rule
Aug-15	2016	Emergency Department Information	Trauma Alert Type	Updated to remove old requirements listed in Rules 64J-2.004 and 64J-2.005 F.A.C. Added business rule to ensure data quality
Aug-15	2016	Emergency Department Information	Trauma Team Activation Date	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Team Activation Time	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Specialist Type	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Specialist Called Date	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Specialist Called Time	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Specialist Arrival Date	Added business rule to prevent blanks
Aug-15	2016	Emergency Department Information	Trauma Specialist Arrival Time	Added business rule to prevent blanks
Aug-15	2016	Additional Validation Rules		Added a Florida specific rule to check records for inclusion criteria